

VIA FACSIMILE JUNE 13, 2003
TO: FAX 703-746-5300#10/C
Dmt
7-2-03

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of:
Ni et al.

Docket No.: PF199D2

Application No.: 09/911,346- Conf: 4955

Group Art Unit: 1646

Filed: July 24, 2001

Examiner: P. Mertz

For: Antibodies to Natural Killer Cell Enhancing
Factor C (As Amended)SUPPLEMENTAL AMENDMENT UNDER 37 C.F.R. § 1.111Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

Pursuant to request by the Examiner, Applicants hereby request that the following amendments and remarks be entered into the above-identified application. Submitted concurrently herewith is: (a) a Fee Transmittal; and (b) Fax Transmission Cover Sheet with Certificate of Transmittal Under 37 C.F.R. § 1.8. Please amend the application as follows.

In the Claims

Applicants herein cancel non-elected claims 128-132 in the above captioned application. Applicants reserve the right to pursue the subject matter encompassed by all canceled claims in one or more divisional or continuation applications.

Please amend claim 116 as follows:

116. (Amended) A method of assaying detecting NKEF C protein in a biological sample comprising:

- C1
- (a) contacting the biological sample from a test subject with the isolated antibody or portion thereof of claim 93; and
 - (b) detecting NKEF C protein in the biological sample.
-

FAX TRANSMISSION**DATE:** June 13, 2003**PTO IDENTIFIER:** Application Number 09/911,346-Conf. #4955
Patent Number**Inventor:** Ni et al.**MESSAGE TO:** P. Mertz**FAX NUMBER:** (703) 746-5300**FROM:** HUMAN GENOME SCIENCES, INC.

Doyle A. Siever

PHONE: (301) 610-5790 x3595**Attorney Dkt. #:** PF199D2**PAGES (Including Cover Sheet):** 5**CONTENTS:**

1. Fax Cover Sheet (1 page);
2. Fee Transmittal (1 page);
3. Supplemental Amendment Under 37 C.F.R. § 1.111 (2 pages); and
4. Certificate of Transmittal Under 37 C.F.R. § 1.8 (1 page).

If your receipt of this transmission is in error, please notify this firm immediately by collect call to (301) 610-5790 and send the original transmission to us by return mail at the address below.

HUMAN GENOME SCIENCES, INC.
9410 Key West Avenue, Rockville, Maryland 20850
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PTO/SB/97 (12-97)

Approved for use through 9/30/00. OMB 0651-0031

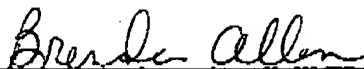
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on June 13, 2003
Date



Signature

Brenda Allen

Typed or printed name of person signing Certificate

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1. Fax Cover Sheet (1 page);
2. Fee Transmittal (1 page);
3. Supplemental Amendment Under 37 C.F.R. § 1.111 (2 pages);
and
4. Certificate of Transmittal Under 37 C.F.R. § 1.8 (1 page).

PTO/SB/17 (05-03)

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FEE TRANSMITTAL for FY 2003

Effective 01/01/2003, Patent fees are subject to annual revision.

☐ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$) 0.00

Complete if Known

Application Number	09/911,346-Cont. #4955
Filing Date	July 24, 2001
First Named Inventor	Jian Ni
Examiner Name	P. Mertz
Art Unit	1646
Attorney Docket No.	PF199D2

METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit Card ☐ Money Order ☐ Other ☐ None

☒ Deposit Account

Deposit Account Number 08-3425

Deposit Account Name Human Genome Sciences, Inc.

The Director is hereby authorized to: (check all that apply)

☐ Charge fee(s) indicated below ☒ Credit any overpayments

☒ Charge any additional fee(s) during the pendency of the application

☐ Charge fee(s) indicated below, except for the filing fee to the above-designated deposit account.

FEE CALCULATION

1. BASIC FILING FEE

Large Entry		Small Entry		Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)		
1001	750	2001	375	Utility filing fee	
1002	330	2002	165	Design filing fee	
1003	520	2003	260	Plant filing fee	
1004	750	2004	375	Reissue filing fee	
1005	160	2005	80	Provisional filing fee	
SUBTOTAL (1)					(\$)

2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

Total Claims 127 - 132** = x = 0.00

Independent Claims 4 - 5** = x = 0.00

Multiple Dependent =

Large Entry		Small Entry		Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)		
1202	18	2202	9	Claims in excess of 20	
1201	84	2201	42	Independent claims in excess of 5	
1203	280	2203	140	Multiple dependent claim, if not paid	
1204	84	2204	42	** Reissue independent claims over original patent	
1205	18	2205	9	** Reissue claims in excess of 20 and over original patent	
SUBTOTAL (2)					(\$)

**or number previously paid, if greater. For Reissues, see above

FEE CALCULATION (continued)

3. ADDITIONAL FEES

Large Entry		Small Entry		Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)		
1051	130	2051	65	Surcharge - late filing fee or oam	
1052	50	2052	25	Surcharge - late provisional filing fee or cover sheet	
1053	130	1053	130	Non-English specification	
1812	2,520	1812	2,520	For filing a request for <i>ex parte</i> reexamination	
1804	920*	1804	920*	Requesting publication of SIR prior to Examiner action	
1805	1,840*	1805	1,840*	Requesting publication of SIR after Examiner action	
1251	110	2251	55	Extension for reply within first month	
1252	410	2252	205	Extension for reply within second month	
1253	930	2253	465	Extension for reply within third month	
1254	1,450	2254	725	Extension for reply within fourth month	
1255	1,970	2255	985	Extension for reply within fifth month	
1401	320	2401	160	Notice of Appeal	
1402	320	2402	160	Filing a brief in support of an appeal	
1403	260	2403	140	Request for oral hearing	
1451	1,510	1451	1,510	Petition to institute a public use proceeding	
1452	110	2452	55	Petition to revive - unavoidable	
1453	1,300	2453	650	Petition to revive - unintentional	
1501	1,300	2501	650	Utility issue fee (or reissue)	
1502	470	2502	235	Design issue fee	
1503	530	2503	315	Plant issue fee	
1460	130	1460	130	Petitions to the Commissioner	
1807	50	1807	50	Processing fee under 37 CFR 1.17(a)	
1806	180	1806	180	Submission of information Disclosure Stmt	
8021	40	8021	40	Recording each patent assignment per property (times number of properties)	
1809	750	2809	375	Filing a submission after final rejection (37 CFR 1.129(a))	
1810	750	2810	375	For each additional invention to be examined (37 CFR 1.129(b))	
1801	750	2801	375	Request for Continued Examination (RCE)	
1802	900	1802	900	Request for expedited examination of a design application	

Other fee (specify)

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$) 0.00

SUBMITTED BY

Name (Print/Type) Doyle A. Siever

Registration No. (Attorney/Agent) 47,088

Complete (if applicable)

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Signature

Doyle A. Siever

Date

June 13, 2003